

## FY 2013 and FY 2014 Community Services Performance Contract

- d. **Populations Served:** The CSB shall provide needed services to adults with serious mental illnesses, children with or at risk of serious emotional disturbance, and individuals with intellectual disability or substance use disorder to the greatest extent possible within the resources available to it for this purpose. These populations are defined in the Core Services Taxonomy, available at [www.dbhds.virginia.gov/OCC-default.htm](http://www.dbhds.virginia.gov/OCC-default.htm).
- e. **Department of Justice Settlement Agreement Requirements:** The CSB agrees to comply with the following requirements in the Settlement Agreement for Civil Action No: 3:12cv00059-JAG between the U.S. Department of Justice and the Commonwealth of Virginia, hereafter referred to as the Agreement, entered in the U. S. District Court for the Eastern District of Virginia on August 23, 2012 [section IX.A, p. 36]. Sections identified in text or brackets refer to sections in the Agreement.
- 1.) Case management services, defined in section III.C.5.b on page 8 of the Agreement, shall be provided to all individuals receiving Medicaid Home and Community-Based ID Waiver services or on the ID Waiver wait list and receiving Elderly or Disabled with Consumer Directed Waiver services or Assisted Technology Waiver services under the Agreement by case managers who are not directly providing or supervising provision of Waiver services to those individuals [section III.C.5.c, p. 8]. The CSB agrees to follow the Department's *Case Management Operational Guidelines*, issued on November 30, 2012.
  - 2.) For individuals receiving case management services pursuant to the Agreement, the individual's case manager shall meet with the individual face-to-face on a regular basis and shall conduct regular visits to the individual's residence, as dictated by the individual's needs [section V.F.1, page 26]. Regular basis means every 90 days with a 10 day grace period consistent with requirements in the ID Waiver and Targeted Case Management Department of Medical Assistance Services regulations. More frequent meetings are required if an individual meets the criteria in section V.F.3 of the Agreement, listed below in requirement 5.
  - 3.) Using a process developed jointly by the Department and VACSB Data Management Committee, within 12 months of the effective date of the Agreement, the CSB shall report the number, type, and frequency of case manager contacts with individuals receiving case management services [section V.F.4, p. 27].
  - 4.) Within 24 months, the CSB shall report key indicators, selected from relevant domains in section V.D.3 on page 24 of the Agreement and listed below in requirement 19, from the case manager's face-to-face visits and observations and assessments [section V.F.5, p 27], using a process developed jointly by the Department and VACSB Data Management Committee.
  - 5.) Within 12 months of the effective date of the Agreement, the individual's case manager shall meet with the individual face-to-face at least every 30 days with a five day grace period for any individuals who meet the following criteria [section V.F.3, pages 26 and 27]:
    - a.) Receive services from providers having conditional or provisional licenses,
    - b.) Have more intensive behavioral or medical needs as defined by the Supports Intensity Scale category representing the highest level of risk to individuals,
    - c.) Have an interruption of service greater than 30 days,
    - d.) Encounter the crisis system for a serious crisis or for multiple less serious crises within a three-month period,
    - e.) Have transitioned from a training center within the previous 12 months, or
    - f.) Reside in congregate settings of five or more individuals

## **FY 2013 and FY 2014 Community Services Performance Contract**

and at least one such visit every two months must be in the individual's place of residence.

- 6.) Case managers shall give individuals a choice of service providers from which the individual may receive approved Waiver services and shall present practicable options of service providers based on the preferences of the individual, including both CSB and non-CSB providers [section III.C.5.c, p. 8].
- 7.) Case managers shall continue to offer education about less restrictive community options on at least an annual basis to any individuals living outside of their own or their families' homes and, if relevant, to their authorized representatives or guardians [section III.D.7, p. 14].
- 8.) CSB emergency services shall be available 24 hours per day and seven days per week, staffed with clinical professionals who shall be able to assess crises by phone and assist callers in identifying and connecting with local services, and, where necessary, the services shall dispatch at least one mobile crisis team member adequately trained to address the crisis [section III.C.6.b.i.A, p. 9]. These requirements shall be met through the regional START program that is staffed 24 hours per day and seven days per week by qualified individuals able to assess and assist individuals and their families during crisis situations and has a mobile crisis team to address crisis situations and offer services and support on site to individuals and their families within three hours.
- 9.) Comply with State Board Policy 1044 (SYS) 12-1 Employment First [section III.C.7.b, p. 11]. This policy supports identifying community-based individual supported employment in integrated work settings as the first and priority service option offered by case managers and support coordinators to individuals receiving day support or employment services.
- 10.) CSB case managers shall liaison with the Department's regional Community Resource Consultants in their regions [section III.E.1, p. 14].
- 11.) Case managers shall participate in discharge planning with individuals' personal support teams (PSTs) for individuals in training centers for whom the CSB is the case management CSB, pursuant to § 37.2-505, § 37.2-606, and § 37.2-837 of the Code of Virginia that requires the CSB to develop discharge plans in collaboration with training centers [section IV.B.6, p. 16].
- 12.) In developing discharge plans, CSB case managers shall collaborate with PSTs to provide to individuals and, where applicable, their authorized representatives, specific options for types of community placements, services, and supports based on the discharge plan and the opportunity to discuss and meaningfully consider these options [section IV.B.9, p. 17].
- 13.) CSB case managers shall coordinate with specific types of community providers identified in discharge plans as providing appropriate community-based services for individuals to provide individuals, their families, and, where applicable, their authorized representatives with opportunities to speak with those providers, visit community placements (including, where feasible, for overnight visits) and programs, and facilitate conversations and meetings with individuals currently living in the community and their families before being asked to make choices regarding options [section IV.B.9.b, p.17].
- 14.) CSB case managers shall assist individuals and, where applicable, their authorized representatives in choosing providers after providing the opportunities described in requirements 12 and 13 above and ensure that providers are timely identified and engaged in preparing for individuals' transitions [section IV.B.9.c, p.17].

## **FY 2013 and FY 2014 Community Services Performance Contract**

- 15.) Case managers shall provide information identified by the Department in collaboration with the Virginia Association of Community Services Boards Data Management Committee to the Department about barriers to discharge for aggregation and analysis by the Department for ongoing quality improvement, discharge planning, and development of community-based services [section IV.B.14, p. 19].
- 16.) The CSB shall coordinate with the Department's Post Move Monitor to conduct post-move monitoring visits within 30, 60, and 90 days following an individual's movement from a training center to a community setting [section IV.C.3, p.19].
- 17.) If it provides day support or residential services to individuals in the target population, the CSB shall implement risk management processes, including establishment of uniform risk triggers and thresholds, that enable it to adequately address harms and risks of harms, including any physical injury, whether caused by abuse, neglect, or accidents [section V.C.1, p. 22].
- 18.) Using the protocol and a real-time, web-based incident reporting system implemented by the Department, the CSB shall report any suspected or alleged incidents of abuse or neglect as defined in § 37.2-100 of the Code of Virginia, serious injuries as defined in 12 VAC 35-115-30, or deaths to the Department [section V.C.2, p. 22].
- 19.) Participate with the Department in beginning to collect and analyze reliable data about individuals receiving services under this Agreement from among the following areas:
  - a.) safety and freedom from harm,
  - b.) physical, mental, and behavioral health and well being, timeliness and adequacy of interventions,
  - c.) avoiding crises,
  - d.) stability,
  - e.) choice and self-determination,
  - f.) community inclusion,
  - g.) access to services,
  - h.) provider capacity; andshall initiate actions to ensure reliable data is collected and analyzed from each of these areas by June 30, 2014 [section V.D.3, pgs. 24 & 25].
- 20.) Participate in the regional quality council established by the Department that is responsible for assessing relevant data, identifying trends, and recommending responsive actions in its region [section V.D.5.a, p. 25].
- 21.) Review data required by the waiver quality improvement plan approved by the Centers for Medicare and Medicaid Services, including evaluation of level of care; development and monitoring of individual services plans; assurance of qualified providers; identification of, response to, and prevention of occurrences of neglect and exploitation; administrative oversight of all waiver functions including contracting; and financial accountability [section V.D.1, p.24].

The Department encourages the CSB to provide the Independent Reviewer with access to its services and records and to individuals receiving services from the CSB; however, access shall be at the sole discretion of the CSB [section VI.G, p. 31].

## **FY 2013 and FY 2014 Community Services Performance Contract**

- 5. Resources:** Exhibit A of this contract includes the following resources: state general funds and federal funds appropriated by the General Assembly and allocated by the Department to the CSB; balances of unexpended or unencumbered state general and federal funds retained by the CSB and used in this contract to support services; local matching funds required by § 37.2-509 or § 37.2-611 of the Code of Virginia to receive allocations of state general funds; Medicaid Clinic, Targeted Case Management, Rehabilitative Services, and Intellectual Disability Home and Community-Based Waiver fees and any other fees, as required by § 37.2-504 or § 37.2-605 of the Code of Virginia; and any other revenues associated with or generated by the services shown in Exhibit A.
- a. Allocations of State General and Federal Funds:** The Department shall inform the CSB of its state general and federal fund allocations in a letter of notification. The Department may adjust allocation amounts during the term of this contract. The Commissioner or his designee shall communicate all adjustments to the CSB in writing. Allocations of state general and federal funds shall be based on state and federal statutory and regulatory requirements, provisions of the Appropriation Act, State Board policies, and previous allocation amounts.
  - b. Allocations of New Appropriations of Additional State General Funds:** The Department shall work with representatives of the CSB to develop a conceptual framework for allocating new appropriations of additional state general funds. This framework shall include a methodology for identifying the minimum amount of the appropriation needed by the smallest CSBs to implement the intent of the new appropriation and criteria for allocating the remainder of the appropriation using population as a significant factor
  - c. Conditions on the Use of Resources:** The Department can attach service requirements or specific conditions that it establishes for use of funds, separate from those established by other authorities, for example, applicable statutory or regulatory requirements such as licensing or human rights regulations or federal anti-discrimination requirements, only to the state general and federal funds that it allocates to the CSB and to the 10 percent local matching funds that are required to obtain the CSB's state general fund allocations.

## **6. CSB Responsibilities**

- a. State Hospital Bed Utilization:** In accordance with § 37.2-508 or § 37.2-608 of the Code of Virginia, the CSB shall identify or develop jointly with the Department and with input from private providers involved with the public mental health, developmental, and substance abuse services system mechanisms, such as the Discharge Protocols, Extraordinary Barriers to Discharge lists, and regional utilization management procedures and practices, and employ these mechanisms collaboratively with state hospitals that serve it to manage the utilization of state hospital beds. Utilization will be measured by bed days received by individuals for whom the CSB is the case management CSB.

## FY 2013 and FY 2014 Community Services Performance Contract

- a. **Mental Health and Substance Abuse Services Performance Expectations and Goals:** Review results of the previous year's implementation and consider revisions of performance expectations and goals that address emergency services and case management services and expand this continuous quality improvement approach to other services provided by the CSB, including preadmission screening and discharge planning and local, regional, and statewide utilization management, and to state facility operations.
- b. **Data Quality and Use:** Work collaboratively through the VACSB Data Management Committee to monitor and increase the timeliness and quality of data submitted through the current CCS and to move beyond the current ways of collecting, analyzing, and using information, including the current CCS and other systems, by establishing a shared vision of future data exchange that (i) takes advantage of changes in technology, (ii) identifies key data elements to collect and the best ways in which to collect them, and (iii) establishes a mechanism to consolidate and store information that promotes the development and understanding of outcomes.
- c. **Quality Improvement Measures:** Work collaboratively to develop and implement a small number of quality improvement measures for behavioral health and developmental services that (1) use existing data to the greatest extent possible, (2) reflect and support the Vision Statement in State Board Policy 1036 and *Creating Opportunities* initiatives, (3) provide regular quarterly feedback directly to individual CSBs and state facilities for their use in improving services, and (4) are posted on the Department's web site for public accessibility.
- d. **Individual Satisfaction Surveys:** Work collaboratively through the VACSB Data Management and Quality Improvement Committees to review the content, administration, and reporting results of surveys listed in section 6.b.4.) c.) to ensure the most efficient and effective measurement and reporting of individual satisfaction with CSB services.

**11. Signatures:** In witness thereof, the Department and the CSB have caused this performance contract to be executed by the following duly authorized officials.

**Virginia Department of Behavioral Health  
And Developmental Services**

\_\_\_\_\_  
\_\_\_\_\_  
**CSB**

By: \_\_\_\_\_

By: \_\_\_\_\_

Name: James W. Stewart, III  
Title: Commissioner

Name: \_\_\_\_\_  
Title: CSB Chairperson

Date: \_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_

Name: \_\_\_\_\_  
Title: CSB Executive Director

Date: \_\_\_\_\_